

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/583031

FILING DATE

05 APR 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2	/		/			
3	2		/			
4	2		/			
5	0		/			
6	0		/			
7	0		/			
8	0		/			
9	0		/			
10	0		/			
11	0		/			
12	/		/			
13	/		/			
14	2		/			
15	0		/			
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18	2		/			
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TOTAL IND.	3		3			
TOTAL DEP.	19	◀	15	◀		
TOTAL CLAIMS	22		18			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.			▼			
TOTAL DEP.				▼		
TOTAL CLAIMS					▼	